## **Amendments to the Claims:**

Please replace the existing listing of claims with the following:

1-36. (cancelled)

37. (currently amended) A pain management method enabling a pain sufferer to self-medicate by repeated dosing with an opioid formulation to achieve analgesia while avoiding toxicity, wherein the method relies solely on the actions of the pain sufferer to manage intake of said opioid during the medication process, said method comprising the steps of:

the pain sufferer continuously inhaling the formulation using a pulmonary drug delivery device to produce analgesia; and

stopping inhalation during the medication process when satisfactory analgesia is achieved or at the onset of a side effect;

wherein the formulation comprises either (1) fentanyl and liposomally encapsulated fentanyl or (2) the combination of (a) remifentanil, alfentanil, sufentanil, or fentanyl and (b) methadone; the concentration and type of said fentanyl and liposomally encapsulated fentanyleach opioid, and amount of and particle size of the formulation delivered from the device on each inhalation, being selected so that, during inhalation, analgesia is achieved before the onset of said side effect, and the onset of said side effect occurs before the onset of toxicity, and so that the maximum total opioid plasma concentration does not reach toxic levels, whereby the onset of said side effect can be used by the pain sufferer to terminate inhalation to avoid toxicity, wherein the ratio of said two fentanyl to liposomally encapsulated fentanyl is selected such that a combined pharmacokinetic profile of the fentanyl and the liposomally encapsulated fentanyl has a combined effect curve providing a peak concentration at an effect site at between 10 and 30 minutes and a concentration at the effect site of a magnitude of at least 85% of said peak concentration for at least 2 hours.

- 38. (previously presented) The method of claim 37 wherein the pulmonary drug delivery device is adapted to dispense the formulation only through an exercise of conscious effort by the patient.
- 39. (currently amended) A pulmonary drug delivery device for use in the pain management method of claim 38, comprising:

a container containing a formulation comprising an effective amount of either (1) fentanyl and liposomally encapsulated fentanyl or (2) the combination of (a) remifentanil, alfentanil, sufentanil, or fentanyl and (b) methadone;

wherein the device is adapted to dispense the formulation only through an exercise of conscious effort by the patient; and the concentration and type of <u>said</u> <u>fentanyl</u> and <u>liposomally encapsulated fentanyl</u> <u>each opioid</u>, and amount of and particle size of the formulation delivered from the device on each inhalation, is selected so that, during inhalation, analgesia is achieved before the onset of said side effect, and the onset of said side effect occurs before the onset of toxicity, and so that the maximum total opioid plasma concentration does not reach toxic levels, whereby the onset of said side effect can be used by the patient to terminate inhalation to avoid toxicity, wherein the ratio of said two fentanyl to liposomally encapsulated fentanyl is selected such that a combined pharmacokinetic profile of the fentanyl and the liposomally encapsulated fentanyl has a combined effect curve providing a peak concentration at an effect site at between 10 and 30 minutes and a concentration for at least 2 hours.

- 40. (cancelled)
- 41. (original) The device of claim 39 wherein said device has a weight ranging from 250 to 2500 grams.
- 42. (previously presented) The device of claim 39 further comprising an outlet through which the formulation is dispensed, wherein said outlet comprises a fenestration which must be sealed by the lips of the patient in order for the formulation to be dispensed.

- 43. (previously presented) The device of claim 39 wherein the dispensing of the formulation is breath actuated.
- 44-48. (cancelled)